

# Best Available Copy

<b>CLAIMS ONLY</b>							SERIAL NO. <i>09/854329</i>	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
1	/					51			
2	/					52			
3	/					53			
4	/					54			
5	/					55			
6	/					56			
7	/					57			
8	/					58			
9	/					59			
10	/					60			
11	/					61			
12	/					62			
13	/					63			
14	/					64			
15	/					65			
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17	/					67			
18	/					68			
19	/					69			
20	/					70			
21	/					71			
22	/					72			
23	/					73			
24	/					74			
25	/					75			
26	/					76			
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28	/					78			
29	/					79			
30	/					80			
31	/					81			
32	/					82			
33	/					83			
34	/					84			
35	/					85			
36	/					86			
37	/					87			
38	/					88			
39	/					89			
40	/					90			
41	/					91			
42	/					92			
43	/					93			
44	/					94			
45						95			
46						96			
47						97			
48						98			
49						99			
50						100			
TOTAL IND.	4					TOTAL IND.			
TOTAL DEP.	40	←	↓			TOTAL DEP.	←	↓	←
TOTAL CLAIMS	44					TOTAL CLAIMS			

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS